## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Women Vote!	
	C C00473918
Check if 24-hour report X 48-hour report New report Amends report filed	on M M / D D / Y Y Y Y Y
Full Name of Payee The Strategy Group, Inc	Date of Public Distribution/Dissemination
Mailing Address 703 N Franklin	04 06 2016
Suite 404	Amount
City State Zip Code	20966.87
Chicago IL 60654-7205	Transaction ID : VN7A7A112P4 Date of Disbursement or Obligation
Purpose of Expenditure Mailhouse  Category/ Type  004	M M / D D / Y Y Y Y
Name of Federal Candidate Support Office	Sought: X House District: 08
Kathleen Matthews Oppose	President Senate State: MD
Calendar Year-To-Date Per Election for Office Sought  Disbut 2016	rrsement For:
Full Name of Payee The Strategy Group, Inc	Date of Public Distribution/Dissemination  M M M O6 2016
Mailing Address 703 N Franklin	Amount
Suite 404	Amount
City State Zip Code	25265.02
Chicago IL 60654-7205	Transaction ID: VN7A7A112Q2 Date of Disbursement or Obligation
Purpose of Expenditure Mailhouse  Category/ Type  O04	M = M / D = D / Y = Y = Y
Name of Federal Candidate Support Office	e Sought: X House District: 04
Joseline Pena-Melnyk Oppose	President Senate State: MD
Calendar Year-To-Date Per Election for Office Sought  Disbut 2016	ursement For: X Primary General  Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	46231.89
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	46231.89
Under penalty of perjury I certify that the independent expenditures reported herein were not may with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
Caroline Fines  [Electronically Filed] Date	4 06 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	